



ICES USA STUDENT PROGRAMS

F-1 Travel Release Form

This Form is Required by ICES 21 days in Advance of All Student Travel

375 N Stephanie St, Henderson, NV 89014; Phone 800-344-3566; F1TravelRequest@icesusa.org; www.icesusa.org

STUDENT INFORMATION		
Last/Family Name:		First/Given Name:
Student ICES ID Number:		Country:
TRAVEL PLAN INFORMATION		
Purpose of Travel:		
Destination Address (hotel, resort, residence etc):		
City:	State:	Zip Code:
Telephone:	How much will this trip cost the Student:	
This trip is supervised by:	Supervisor Telephone:	
Relationship to the Student:	Departure Date:	Return Date:
Mode of Transportation: Bus Train Airplane Car Other:		
HOST FAMILY INFORMATION		
Last Name:		First Name:
Address:		
City:	State:	Zip Code:
Telephone:	Email Address:	
TRAVEL LIABILITY RELEASE & SIGNATURES		
I hereby request permission from my natural parents, the host family, my high school and ICES for the above travel. I hereby confirm that I fully understand that during the period mentioned, I am responsible for any and all expenses and travel arrangements. I hereby agree to indemnify and hold harmless International Cultural Exchanges Services, the Overseas Organization and the Host Family.		
Student Signature:		Date:
Host Parent Signature:		Date:
Natural Parent/Guardian Signature:		Date:
Natural Parent/Guardian Name:		
Local Coordinator Signature:		Date:
Local Coordinator Name:		
OFFICIAL HIGH SCHOOL APPROVAL		
As the official representative of the student's high school, in accordance with the travel plans as stated above, the student's absence(s) will be excused and he/she will be allowed to make up work missed.		
High School Officer Signature:		Date:
High School Officer Name:		Title:
High School Name and Address:		
Internal ICES Use Only:		
Approved by ICES: Yes No		If no, reason:
ICES Officer Signature:		Date:
Method of Notification to Student:		Date:

ICES Local Coordinator/Regional Director please submit completed form by email F1TravelRequest@icesusa.org.